Fill in this infor	mation to identify your	case:		
Debtor 1	Valerie C Dolan			
Debtor 2 (Spouse if, filing)	First Name First Name	Middle Name Middle Name	Last Name Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number (if known)	19-30185			☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,128.68
	1c. Copy line 63, Total of all property on Schedule A/B	\$	13,128.68
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,038.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,663.82
	Your total liabilities	\$	59,701.82
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,533.91
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,003.00
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Doc 6 Filed 01/15/19 Entered 01/15/19 14:33:51 Desc Main Case 19-30185-KLP Document

Page 2 of 36 Case number (if known) 19-30185 Debtor 1 Valerie C Dolan

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		2 700 00
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	2,798.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
1 Tolli 1 alt 4 on Schedule Lif, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

ormation to identify your c		nt Page 3 of 36		
	ase and this filing:			
Valerie C Dolan				
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
Filst Name	Middle Name	Last Name		
Bankruptcy Court for the:	EASTERN DISTRICT OF	/IRGINIA		
10-30185				☐ Check if this is an
13-30103				amended filing
400 A /D				
ıle A/B: Prope	erty			12/15
Be as complete and accurate nore space is needed, attach a uestion.	e as possible. If two married a separate sheet to this form.	people are filing together, both a On the top of any additional pag	re equally responsible for s	upplying correct
be Each Residence, Building,	Land, or Other Real Estate 1	ou Own or have an interest in		
or have any legal or equitable	interest in any residence, but	ilding, land, or similar property?		
Dort 2				
re is the property?				
be Your Vehicles				
Nissan	Who has an interes	et in the property? Check one	Do not deduct secured of	laims or exemptions. Put
Xterra		it in the property? Check one	the amount of any secur	
7110114	Debtor 1 only			
2005	I I Debtor 2 only			ims Secured by Property.
2005 mate mileage: 151,0	Debtor 2 only Debtor 1 and De	btor 2 only	Current value of the entire property?	
	Debtor 1 and De	btor 2 only ne debtors and another	Current value of the	ims Secured by Property. Current value of the
mate mileage: 151,0	Debtor 1 and De Debtor 1 and De	•	Current value of the	ims Secured by Property. Current value of the
	19-30185 Torm 106A/B ILE A/B: Proposition of the	Torm 106A/B Ile A/B: Property In separately list and describe items. List an asset only once the season of the s	Torm 106A/B Ile A/B: Property In separately list and describe items. List an asset only once. If an asset fits in more than on Be as complete and accurate as possible. If two married people are filling together, both a solve space is needed, attach a separate sheet to this form. On the top of any additional paginestion. The Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In por have any legal or equitable interest in any residence, building, land, or similar property? The each residence of the property of the property? The each residence of the property of the property? The each residence of the property of the property? The each residence of the property of the property of the property? The each residence of the property of the property of the property of the property? The each residence of the property of the property of the property of the property of the property? The each residence of the property o	Torm 106A/B Ile A/B: Property In separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for store space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and cast to be Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In the property? Part 2. The is the property? The Your Vehicles The you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles Nissan Who has an interest in the property? Check one

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 19-30185-KLP Doc 6 Filed 01/15/19 Entered 01/15/19 14:33:51 Desc Main Document Page 4 of 36 Case number (if known) 19-30185 Debtor 1 Valerie C Dolan Yes. Describe..... Unknown Kirby vacuum cleaner 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$200.00 Ipad 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Womens clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No Yes. Give specific information..... \$1,451.00 hearing aids 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,151.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

Case 19-30185-KLP Doc 6 Filed 01/15/19 Entered 01/15/19 14:33:51 Desc Main Page 5 of 36 Document Case number (if known) 19-30185 Debtor 1 Valerie C Dolan claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Credit Union** Virginia Credit Union account ending in 3264 \$5.00 17.1. Savings Virginia Credit Union account ending in 3272 \$1,018.68 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) Fidelity 401k from Sabra \$4.828.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Debtor 1	Valerie C Dolan	Document	Page 6 of 36 c	ase number (if known)	19-30185
☐ Ye	s. Give specific information about the	hem			
Exa. ■ No	nts, copyrights, trademarks, trademples: Internet domain names, web	sites, proceeds from royalties a		ts	
	nses, franchises, and other gener				
Exa. ■ No	mples: Building permits, exclusive li	censes, cooperative associatio	n holdings, liquor licens	es, professional licens	es
	or property owed to you?				Current value of the
money (n property office to you.				portion you own? Do not deduct secured claims or exemptions.
□ No	refunds owed to you s. Give specific information about the	nem, including whether you alre	eady filed the returns and	d the tax years	
		estimated 2018 federal t	ax refund	Federal	\$1,000.00
				1	
		estimated VA tax refund	I	State	\$1.00
Exa. No Ye 30. Other Exa. No Ye No	s. Give specific information r amounts someone owes you mples: Unpaid wages, disability insu- benefits; unpaid loans you m s. Give specific information ests in insurance policies mples: Health, disability, or life insur s. Name the insurance company of Company of	urance payments, disability ben nade to someone else rance; health savings account (each policy and list its value.	nefits, sick pay, vacation (HSA); credit, homeown	pay, workers' compe	ensation, Social Security
	<u>group in </u>	b poncy unough employer	<u> </u>		
	health, d thru emp	ental and visioin insurand loyer	debtor a	nd providers	\$0.00
If yo som	interest in property that is due you are the beneficiary of a living trust eone has died. s. Give specific information			urrently entitled to rec	eive property because

Official Form 106A/B Schedule A/B: Property page 4

	Case 19-30185-KLP	Doc 6	Filed 01/15/2 Document	L9 Ente Page 7	ered 01/15/19 14:33:5	
Debtor 1	Valerie C Dolan		Boodinent	- age i	Case number (if known)	19-30185
<i>Exai</i> ■ No	ns against third parties, whether mples: Accidents, employment dis				demand for payment	
34. Othe	r contingent and unliquidated o	claims of ev	ery nature, includin	g countercla	ims of the debtor and rights to	o set off claims
☐ No	financial assets you did not alross. S. Give specific information	eady list				
		Any pote date of fi	•	ury or simil	ar claim of the debtor at	Unknow
		but not li insurance claims, a	mited to inchoate	interest in erty settlem ebtor has in		Unknow
	d the dollar value of all of your o Part 4. Write that number here.					\$6,852.68
Part 5:	Describe Any Business-Related Pro	perty You Ow	n or Have an Interest I	n. List any rea	ıl estate in Part 1.	
■ No.	u own or have any legal or equitable Go to Part 6. Go to line 38.	e interest in a	nny business-related p	roperty?		
	Describe Any Farm- and Commercial fyou own or have an interest in farmla			n or Have an Ir	nterest In.	
■ N	ou own or have any legal or equitor. Go to Part 7. es. Go to line 47.					
Part 7:	Describe All Property You Own	or Have an li	nterest in That You Dic	Not List Abov	/e	
	ou have other property of any kimples: Season tickets, country clu					

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

☐ Yes. Give specific information.......

■ No

\$0.00

Document Page 8 of 36

Case number (if known) 19-30185 Debtor 1 Valerie C Dolan List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 55. Part 2: Total vehicles, line 5 56. \$4,125.00 Part 3: Total personal and household items, line 15 \$2,151.00 57. 58. Part 4: Total financial assets, line 36 \$6,852.68 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$13,128.68 Copy personal property total \$13,128.68 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$13,128.68

Official Form 106A/B Schedule A/B: Property page 6

		IAAAIIII	1 11111 111111	
Fill in this info	rmation to identify your	case:		
Debtor 1	Valerie C Dolan			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number	19-30185			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che		
Ipad Line from Schedule A/B: 7.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(4a)
Ellio II olii osii osalo 702. TTT			100% of fair market value, up to any applicable statutory limit	
Womens clothing	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
Life from Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
Savings: Virginia Credit Union account ending in 3272	\$1,018.68		\$1,018.68	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
401(k): Fidelity 401k from Sabra	\$4,828.00		\$4,828.00	Va. Code Ann. § 34-34
Life from Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
Federal: estimated 2018 federal tax refund	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
	State: estimated VA tax refund Line from Schedule A/B: 28.2	\$1.00	•	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Any potential personal injury or similar claim of the debtor at date of filing Line from Schedule A/B: 35.1	Unknown	■	100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-28.1
	All proceeds within 6 months of filing bankruptcy including but not limited to inchoate interest in inheritance property, insurance proceeds, property settlements, personal injury claims, and any interest debtor has in property that is unknown to the debto Line from Schedule A/B: 35.2	Unknown	□	100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(2)
	All proceeds within 6 months of filing bankruptcy including but not limited to inchoate interest in inheritance property, insurance proceeds, property settlements, personal injury claims, and any interest debtor has in property that is unknown to the debto Line from Schedule A/B: 35.2	Unknown		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	All proceeds within 6 months of filing bankruptcy including but not limited to inchoate interest in inheritance property, insurance proceeds, property settlements, personal injury claims, and any interest debtor has in property that is unknown to the debto Line from Schedule A/B: 35.2	Unknown		100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 38.2-3122
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ses fil	•	,

		Document P	'age 1	1 of 36	_	
Fill in this information t	o identify you	r case:				
Debtor 1 Vale	rie C Dolan					
First N		Middle Name La	ast Name			
Debtor 2						
(Spouse if, filing) First N	lame	Middle Name La	ast Name			
United States Bankruptcy	Court for the:	EASTERN DISTRICT OF VIRGINIA	A			
Case number 19-3018	25					
(if known)	55				☐ Check	if this is an
· · · · · · · · · · · · · · · · · · ·					_	ded filing
Official Form 106	D					
		Who Have Claims Se	cure	d by Property	,	12/15
				<u> </u>		
		f two married people are filing together, b out, number the entries, and attach it to th				
number (if known).						
 Do any creditors have cla 	ims secured by	your property?				
☐ No. Check this box	x and submit th	is form to the court with your other sch	redules. \	You have nothing else to	report on this form.	
Yes. Fill in all of th	e information b	pelow.				
Part 1: List All Secur	ed Claims					
				Column A	Column B	Column C
		nore than one secured claim, list the creditor a particular claim, list the other creditors in F		Amount of claim	Value of collateral	Unsecured
		al order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Commonwealth	Motors	Describe the property that secures the	claim:	value of collateral. \$100.00	\$4,125.00	If any \$100.00
Creditor's Name	MOTOI 3	2005 Nissan Xterra 151,000 mile		Ψ100.00	ψτ,120.00	Ψ100.00
		still owes on down payment				
9101 Jefferson D	Davis	. ,				
Hwy		As of the date you file, the claim is: Checapply.	ck all that			
N Chesterfield, \	/A 23237	☐ Contingent				
Number, Street, City, State	e & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Che	ck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mort	gage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 or	nly	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the debtor	s and another	☐ Judgment lien from a lawsuit				
Check if this claim related community debt	es to a	Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account number				
2.2 Lendmark Finan	cial Ser	Describe the property that secures the		\$5,843.00	\$4,125.00	\$1,718.00
Creditor's Name		2005 Nissan Xterra 151,000 mile	es			
2118 Usher St.		As of the date you file, the claim is: Checapply.	ck all that			
Covington, GA 3	0014	☐ Contingent				
Number, Street, City, State	e & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Che	ck one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		■ An agreement you made (such as mort	tgage or se	ecured		
Debtor 2 only		car loan)				

☐ Debtor 1 and Debtor 2 only

community debt

 \square Check if this claim relates to a

☐ At least one of the debtors and another

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

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Debtor 1 Valerie C I			Case number (if known)	19-30185		
First Name	Middle N	lame Last Name				
Date debt was incurred	Opened 08/18 Last Active 10/19/18	Last 4 digits of account number 2608	<u> </u>			
2.3 Quorum Fed C	r IIn	Describe the property that secures the claim:	\$1,451.00	\$1,451.00	\$0.00	
Creditor's Name		hearing aids	φ1,431.00	φ1,431.00	φυ.υυ	
		As of the date you file, the claim is: Check all that				
2 Manhattanvil Purchase, NY		apply. Contingent				
Number, Street, City, S	tate & Zip Code	☐ Unliquidated				
Who owes the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as mortgage or s car loan)	ecured			
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the deb		☐ Judgment lien from a lawsuit				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)				
Date debt was incurred	Opened 11/17 Last Active 10/25/18	Last 4 digits of account number 0001				
2.4 United Consur	mer Finl S	Describe the property that secures the claim:	\$644.00	Unknown	Unknown	
Creditor's Name		Kirby vacuum cleaner				
865 Bassett Ro Westlake, OH		As of the date you file, the claim is: Check all that apply. ☐ Contingent				
Number, Street, City, S	tate & Zip Code	☐ Unliquidated				
Who owes the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or s car loan)	ecured			
☐ Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the deb		☐ Judgment lien from a lawsuit				
Check if this claim re community debt	lates to a	Other (including a right to offset)				
	Opened 02/17 Last Active					
Date debt was incurred	11/10/18	Last 4 digits of account number 3551				
Add the dollar value of	VOUR entries in C	Column A on this page. Write that number here:	\$8,038	00		
	•	the dollar value totals from all pages.	\$8,038			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Ou.	30 13 00100 KEI	Dood	ocument Page 1	13 of 36	00.01 L	JCSO Main
Fill in this inf	ormation to identify your			3 (11 3()		
Debtor 1	Valerie C Dolan					
DODIOI 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	EASTERN DIS	TRICT OF VIRGINIA			
Case number	19-30185					
(if known)						Check if this is an
						amended filing
Official Fo	orm 106E/F					
		/ho Have II	nsecured Claims			12/15
			ors with PRIORITY claims and	I D. 4 O C 19 14 . N	IONIDDIODITY .I.	
eft. Attach the (name and case	Continuation Page to this pag number (if known).	ge. If you have no i	If more space is needed, copy nformation to report in a Part			
	t All of Your PRIORITY Ur					
	ditors have priority unsecure	d ciaims against y	ou?			
No. Go t	to Part 2.					
Yes.	4 All of Vour NONDDIODIT	V Umanaumad Cl	aima			
	t All of Your NONPRIORIT					
_ '	ditors have nonpriority unsec	_	-			
☐ No. You	have nothing to report in this p	eart. Submit this form	n to the court with your other sch	hedules.		
Yes.						
unsecured	claim, list the creditor separatel	y for each claim. Fo	petical order of the creditor what reach claim listed, identify what rs in Part 3.If you have more that	t type of claim it is. Do not lis	t claims already in	cluded in Part 1. If more
=						Total claim
4.1 Acce	ptance Now	La	st 4 digits of account number	1901		\$641.00
Nonpri	ority Creditor's Name		-			
	Headquarters Drive	W	hen was the debt incurred?	2018		_
	o, TX 75024 er Street City State Zlp Code	As	of the date you file, the claim	is: Check all that apply		
Who in	ncurred the debt? Check one.		-	,		
■ Del	btor 1 only		Contingent			
☐ Del	btor 2 only		Unliquidated			
☐ Del	btor 1 and Debtor 2 only		Disputed			
☐ At I	east one of the debtors and an	other Ty	pe of NONPRIORITY unsecure	ed claim:		
☐ Che	eck if this claim is for a com	munity \Box	Student loans			
debt Is the	claim subject to offset?		Obligations arising out of a sepport as priority claims	paration agreement or divorc	e that you did not	
■ No	-	·	Debts to pension or profit-shar	ing plans, and other similar o	lebts	
☐ Yes	3		Other Specify Consumer	debt		

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Debtor 1 Valerie C Dolan ase number (if known) 19-30185 4.2 \$700.00 **American Family Fitness** Last 4 digits of account number Nonpriority Creditor's Name 12201 South Chalkley Road When was the debt incurred? Chester, VA 23831 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify consumer debt ☐ Yes American Web Loan 4.3 Last 4 digits of account number \$750.00 Nonpriority Creditor's Name When was the debt incurred? 522 N. 14th Street #130 Ponca City, OK 74601-4654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes payday loan Other. Specify 4.4 Appomattox Imaging 6249 \$46.05 Last 4 digits of account number Nonpriority Creditor's Name 930 South Ave Ste 100 When was the debt incurred? 2018 Colonial Heights, VA 23834 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical/dental services ☐ Yes

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Case number (if known) 19-30185

Debtor	1 Valerie C Dolan	Case number (if known) 19-30185	
4.5	AT&T Wireless (p)	Last 4 digits of account number 1912	\$605.75
	Nonpriority Creditor's Name	When was the debt incurred? 2017	
	Bankruptcy Dept 1801 Valley View Lane	When was the debt incurred? 2017	
	Dallas, TX 75234-8906		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer Debt	
4.6	BB&T	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • •
	Virginia Recovery Department	When was the debt incurred?	
<u> </u> 	1410 Coulter Road		
	Roanoke, VA 24012 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
		· · · · · · · · · · · · · · · · · · ·	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify consumer debt	
4.7	Check City	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name		
	PO Box 970183	When was the debt incurred?	
	Orem, UT 84097 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	AS of the date you me, the diam is. Officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	_	_	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify consumer debt	

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Debtor	1 Valerie C Dolan	Case number (if known) 19-30185	
4.8	Check into Cash	Last 4 digits of account number 6UG1	\$1,200.00
1.0	Nonpriority Creditor's Name		Ψ1,200.00
	103rd Western Av.	When was the debt incurred? 2018	
	Chicago, IL 60645		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify payday loan	
	LI 165	Other. Specify Payday Ioan	
4.9	Enhanced Recovery Co L	Last 4 digits of account number 6572	\$606.00
	Nonpriority Creditor's Name		Ψ000.00
	Po Box 57547	When was the debt incurred? Opened 09/18	
	Jacksonville, FL 32241		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Attorney At T Mobility	
		' ´	
4.1	First Virginia Financial Services*	Lord Billion Construction	\$400.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	φ400.00
	6785 Bobcat Way	When was the debt incurred?	
	Suite 200		
	Dublin, OH 43016		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify payday loan	

Debtor	1 Valerie C Dolan	Document Page 1	Case number (if known) 19-30185	
4.1	Ford Motor Credit - Bankruptc	Last 4 digits of account number	1003	\$15,573.49
	Nonpriority Creditor's Name P O Box 6275 Dearborn, MI 48121	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify car loan de	ficiency	
4.1	Frd Motor Cr	Last 4 digits of account number	1003	\$28,640.00
	Nonpriority Creditor's Name	_	0	
	Po Box Box 542000 Omaha, NE 68154	When was the debt incurred?	Opened 10/17 Last Active 6/19/18	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify 2017 Ford I surrendere		
4.1	Golds Gym	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 1601 Willow Lawn Richmond, VA 23230	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Document Page 18 of 36 Debtor 1 Valerie C Dolan ase number (if known) 19-30185 4.1 James River Emergency Group \$505.00 Last 4 digits of account number 4 Nonpriority Creditor's Name P O Box 14099 When was the debt incurred? Belfast, ME 04915 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes 4.1 Laboratory Corp. of Amer* \$60.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2240 When was the debt incurred? re: Bankruptcy Burlington, NC 27216-224 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services 81722177 ☐ Yes 4.1 Patient First * 0955 \$76.13 6 Last 4 digits of account number Nonpriority Creditor's Name ATTN: Bankruptcy When was the debt incurred? 9/2018 5000 Cox Road Glen Allen, VA 23060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

☐ Student loans

Type of NONPRIORITY unsecured claim:

At least one of the debtors and another

☐ Check if this claim is for a community

Debto	r 1 Valerie C Dolan	Document Page 19	9 of 36 Case number (if known) 19-30185	
			· , <u> </u>	
4.1 7	Pivot Physical Therapy	Last 4 digits of account number	5016	\$120.00
	Nonpriority Creditor's Name P O Box 69030	When was the debt incurred?	2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical se	rvices	
4.1	Radiology Assoc.of Richmond, Inc.* Nonpriority Creditor's Name	Last 4 digits of account number	6249	\$10.40
	Business Office P.O. Box 13343	When was the debt incurred?	2018	
	2602 Buford Road Richmond, VA 23235 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical set	rvices	
4.1	Southside Regional Medical Ctr	Last 4 digits of account number		\$730.00
	Nonpriority Creditor's Name 200 Medical Park Boulevard Petersburg, VA 23805	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify __medical/dental services

Debtor 1 Valerie C Dolan Page 20 of 36 Case number (if known) 19-30185

4.2	Speedy Cash	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name P O Box 780408	When was the debt incurred?	
	Wichita, KS 67278 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	_
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify payday loan	=
4.2	Verizon Virginia (e)	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name 500 Technology Dr. Suite 300	When was the debt incurred?	-
	Saint Charles, MO 63304-2225 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify consumer debt	-
Part 3	List Others to Be Notified About a Do	ebt That You Already Listed	
is try have notif	ring to collect from you for a debt you owe to so more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out		y here. Similarly, if you
	and Address 「Wireless (p)	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (<i>Check one</i>):	·
	ruptcy Dept	_ , , , , , , , , , , , , , , , , , , ,	
1801	Valley View Lane s, TX 75234-8906	■ Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	
	and Address k City	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one):	ims
2729	-B W Broad Street	■ Part 2: Creditors with Nonpriority Unsecured	
Rich	mond, VA 23220	,	Oldino
		Last 4 digits of account number	
Cred	and Address ence Resource Mgmt	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one):	ims
	30x 2390	■ Part 2: Creditors with Nonpriority Unsecured	Claims
Souti	hgate, MI 48195-4390	Last 4 digits of account number	
	and Address Motor Credit - Bankruptc	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Cla	ims

Official Form 106 E/F

Debtor 1 Valerie C Dolan	Document	Page 21 of 36 Case number (if known) 19-30185				
P O Box 6275 Dearborn, MI 48121		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Dear 50111, IIII 40121	Last 4 digits of account num	nber				
Name and Address		Part 2 did you list the original creditor?				
James River Emergency Group, LLC	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
c/o Payments MD P.O. Box 3475 Toledo, OH 43607-0475		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Toledo, On 43007-0473	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or	Part 2 did you list the original creditor?				
Prof. Account Services Inc	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
P O Box 1022 Wixom, MI 48393-1022		■ Part 2: Creditors with Nonpriority Unsecured Claims				
,	Last 4 digits of account num	nber				
Name and Address	On which entry in Part 1 or	Part 2 did you list the original creditor?				
Prof. Account Services Inc	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
P O Box 1280 Oaks, PA 19456-1280		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account num	nber				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Professional Account Services	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 188 Brentwood, TN 37024		■ Part 2: Creditors with Nonpriority Unsecured Claims				
,	Last 4 digits of account num	nber				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	51,663.82
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	51,663.82

Line 4.2 of (Check one):

Last 4 digits of account number

Name and Address

Suite 104

Richmond Fitness

4200 Innslake Drive

Glen Allen, VA 23060

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Fill in this infor					
Debtor 1	Valerie C Dolan				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Case number	19-30185				
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1		,	, - · · · , - · , , - · · · · ·		
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olate	Zii Oodo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		DOGUME	III Paue / 3 OI	<u> </u>	
Fill in this info	rmation to identify your c	case:			
Debtor 1	Valerie C Dolan				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number	19-30185				
(if known)				☐ Check if this amended fil	
Official Fo	orm 106H				
Schedule	H: Your Code	ebtors			12/15
1. Do you h □ No ■ Yes	nave any codebtors? (If y	ou are filing a joint case, o	do not list either spouse as	a codebtor.	
2. Within th	ne last 8 years, have you lifornia, Idaho, Louisiana,			(Community property states and territories inton, and Wisconsin.)	nclude
■ No. Go to	o line 3.				
☐ Yes. Did	your spouse, former spou	se, or legal equivalent live	with you at the time?		
in line 2 ag	ain as a codebtor only if), Schedule E/F (Official	that person is a guarant	tor or cosigner. Make su	your spouse is filing with you. List the pe re you have listed the creditor on Schedu i). Use Schedule D, Schedule E/F, or Sche	le D (Official
	mn 1: Your codebtor Number, Street, City, State and ZIF	^o Code		Column 2: The creditor to whom you ow Check all schedules that apply:	e the debt
				,	
3.1 Deni	se Daniels			Schedule D, line 2.4	
form	er roommate			☐ Schedule E/F, line	
101111				☐ Schedule G United Consumer FinI S	

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Fill	in this information t	o identify your ca	ise.								
	otor 1	Valerie C Do	_								
	otor 2 buse, if filing)										
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF VIRGINIA							
Cas	se number 19-	30185					Che	ck if this is	:		
(If kn	nown)			-				An amende	ed filing		
_										g postpetition ollowing date:	
O_1	fficial Form	<u> 1061</u>						MM / DD/ `	YYYY		
S	chedule I:	Your Inco	ome								12/15
spo atta	use. If you are sep ch a separate shee	parated and your et to this form. C e Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inc	lude infor	matic	n abou	ıt your sp	ouse. If mo	ore space is	needed,
1.	information.	Oymem		Debtor 1				Debtor	2 or non-fil	ling spouse	
	If you have more		Employment status	■ Employed		☐ Employed					
	attach a separate information about employers.	1 0		□ Not employed				☐ Not e	employed		
	Include part-time,	seasonal or	Occupation	warehouse							
	self-employed wo		Employer's name	Sabra Dipping	g Compar	ny					
	Occupation may i or homemaker, if		Employer's address	777 Westches White Plains,							
			How long employed t	here? 2 yea	rs						
Par	t 2: Give De	tails About Mon	thly Income								
spou If yo	use unless you are	separated. spouse have mo	re than one employer, cothis form.	,	·	•			·	·	J
							For De	ebtor 1		otor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthle		2.	\$;	2,383.33	\$	N/A	
3.	Estimate and list	t monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	2,3	383.33	\$	N/A	

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Debt	tor 1	Valerie C Dolan	_	Case	number (if known)	19-30185	;	
				Fo	r Debtor 1	For Debt	tor 2 or g spouse	
	Cop	y line 4 here	4.	\$	2,383.33	\$	N/A	
				_	,	-		-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	550.42	\$	N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$_	110.50	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$	N/A	-
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_ \$	188.50 0.00	\$ \$	N/A N/A	=
	5g.	Union dues	5g.	\$_	0.00	\$	N/A N/A	-
	5h.	Other deductions. Specify:	5h			+ \$	N/A	-
6.	hhΔ	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	849.42	\$	N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _ \$	1,533.91	\$	N/A	-
8.		all other income regularly received:		· –	1,000.01	·		-
0.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$-	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		-			1471	-
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$_	0.00	\$	N/A	_
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	_
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	_	Specify:	8f.	\$_	0.00	\$	N/A	_
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h	+ \$_	0.00	+ \$	N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	Δ
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		1,533.91 + \$	N/	/A = \$	1,533.91
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'				-	1,000.01
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. In include any amounts already included in lines 2-10 or amounts that are not cify:	deper		•	ted in <i>Sched</i>	dule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies				a, if it	2. \$	1,533.91
							Combin	
13.	Do y	rou expect an increase or decrease within the year after you file this form	?				monthly	y income
		No.						
		Yes. Explain:						

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Fill	in this informa	tion to identify yo	our case:			I		
Deb		Valerie C Do				Cha	eck if this is:	
DCD	101 1	valerie C DO	iaii				An amended filing	
	tor 2 buse, if filing)							wing postpetition chapter the following date:
` '	, 0,	untary Court for the	. EASTE	RN DISTRICT OF VIRGIN	10		MM / DD / YYYY	
Onic	ed States Banki	upicy Court for the	. EASIE	KN DISTRICT OF VIRGIN	<u>IA</u>		WIWI/DD/TTTT	
	e number 19 nown)	-30185						
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/1
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this i n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to		in a sonar	ate household?				
	□ 103. D00		ш а эсраг	ate flouseffold:				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do your exp	enses include						☐ Yes
Э.	expenses of	people other t	han $_{\square}$	No Yes				
	yourself and	d your depende	nts? □	165				
Par		ate Your Ongoi			au ara uaina thia f		ummlamant in a Cha	onton 12 acce to report
exp				uptcy filing date unless y y is filed. If this is a supp				
the	value of such	n assistance an	non-cash d have ind	government assistance it cluded it on <i>Schedule I:</i> Y	f you know 'our Income		Your exp	ansos
(On	ficial Form 10	61.)					Tour exp	CHSCS
4.		r home owners d any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$	600.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat		ipkeep expenses		4c.	·	0.00
5.				oominium dues our residence, such as ho	me equity loans	4d. 5.		0.00 0.00

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otor 1 Valerie C Dolan	Case number (if know	/n) 19-30185
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	0.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	60.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	450.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	75.00
Personal care products and services	10. \$	25.00
Medical and dental expenses	11. \$	60.00
Transportation. Include gas, maintenance, bus or train fare.	40 ft	275.00
Do not include car payments.	12. \$	
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	0.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	100.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:	16. \$	0.00
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	214.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: hearing aids	17c. \$	44.00
17d. Other. Specify: misc	17d. \$	100.00
Your payments of alimony, maintenance, and support that you did not report as	10 ¢	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you.	18. \$ 	
Specify:	φ	0.00
Other real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		۵
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21. +\$	0.00
· · · -		
Calculate your monthly expenses	•	0.000.00
22a. Add lines 4 through 21.	\$	2,003.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,003.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,533.91
23b. Copy your monthly expenses from line 22c above.	23b\$	2,003.00
		•
23c. Subtract your monthly expenses from your monthly income.	222	-469.09
The result is your monthly net income.	23c. \$	-409.09

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: debtor expects to surrender current ar but mus find a replacement vehicle that will have roughly tthe same costs.

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Fill in this info	rmation to identify your	case:			
Debtor 1	Valerie C Dolan				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		
Case number	19-30185				
(if known)					Check if this is an amended filing
Official For	m 106Dec				
Declara	tion About a	ın Individua	I Debtor's Sci	hedules	12/15
If two married p	people are filing togethe	r, both are equally resp	onsible for supplying corre	ect information.	
					nt, concealing property, or
	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1		nkruptcy case can result in	n fines up to \$250,000, o	or imprisonment for up to 20
years, or botti.	10 0.0.0. 33 102, 1041, 1	010, and 0071.			
0:	Deleses				
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankrup	otcy Petition Preparer's Notice,
				Declaration, and	d Signature (Official Form 119)
Un den men	معامما المستشمين المعامية	that I have used the aver		d	d
	re true and correct.	that I have read the Sur	nmary and schedules filed	i with this declaration a	ina
	lerie C Dolan		x		
	ie C Dolan ure of Debtor 1		Signature of D	Debtor 2	

Date

Date **January 3, 2019**

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		nation to identify you						
De	btor 1	Valerie C Dolan First Name	Middle Name		Last Name			
	btor 2	First Name	Middle Nesse		Loot Nome			
` `	ouse if, filing)	First Name	Middle Name		Last Name			
Uni	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F VIRG	INIA			
1	se number 1	9-30185					_	heck if this is an nended filing
	ficial For		Affairs for Indivi	dual	s Filing for B	ankruptcy		4/1:
info	rmation. If me		ible. If two married people , attach a separate sheet to stion.					
Pa	rt 1: Give D	etails About Your M	arital Status and Where Yo	u Lived	I Before			
1.	What is your	current marital stat	us?					
	☐ Married							
	■ Not mari	ried						
2.	During the la	ıst 3 years, have you	lived anywhere other than	n where	you live now?			
	□ No							
		t all of the places you	lived in the last 3 years. Do i	not inclu	ıde where you live nov	<i>I</i> .		
	Debtor 1 Pri	or Address:	Dates Debtor	1	Debtor 2 Prior Ac	Idress:		Dates Debtor 2
	2128 Walto Petersburg	on Street g, VA 23803	lived there From-To: Nov 2016 to 2017	June	☐ Same as Debtor	1		lived there ☐ Same as Debtor 1 From-To:
		ngton Road eights, VA 23834	From-To: June 2017 to present)	☐ Same as Debtor	1		Same as Debtor 1 From-To:
3. stat	es and territorie	es include Arizona, Ca	ver live with a spouse or lealifornia, Idaho, Louisiana, None hedule H: Your Codebtors (Codebtors)	evada, I	New Mexico, Puerto R			
Pai	rt 2 Explain	n the Sources of You	ur Income					
4.	Fill in the total	I amount of income yo	mployment or from operation received from all jobs and have income that you recei	all busi	nesses, including part	-time activities.	vious calen	dar years?
	□ No							
	_	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of inco		Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Valerie C Dolan

				Debtor 1					Debtor 2		
					of income that apply.	(be	oss income fore deductions and lusions)	nd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		1 of curren iled for ban	t year until kruptcy:	■ Wages bonuses,	ages, commissions, \$1,400.00 ses, tips		00	☐ Wages, com bonuses, tips	missions,		
				☐ Opera	ting a business				☐ Operating a	business	
	last calend nuary 1 to	dar year: December 3	31, 2018)	■ Wages bonuses,	s, commissions, tips		\$33,344.0	00	☐ Wages, com bonuses, tips	missions,	
				☐ Opera	ting a business				☐ Operating a	business	
		lar year bef December 3		■ Wages bonuses,	s, commissions, tips		\$26,916.0	00	☐ Wages, com bonuses, tips	missions,	
				☐ Opera	ting a business				☐ Operating a	business	
	winnings. I List each s No	f you are filir	ng a joint cas	e and you h	nave income that y	you red	ceived together, lis	t it onl	y once under De	ebtor 1.	gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eac (be	oss income from th source fore deductions and dusions)	nd	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pay	ments You	Made Befo	ore You Filed for	Bankr	uptcy				
6.	□ No.	Neither De individual p During the S No. Yes * Subject to Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o	ebtor 2 ha personal, for re you filed ach creditor editor. Do no payments to on 4/01/19	amily, or househo for bankruptcy, di r to whom you pai ot include paymer o an attorney for to and every 3 year e primarily consu	umer could purp id you p id a tot nts for chis bar is after umer d	pay any creditor a al of \$6,425* or modomestic support of hkruptcy case. that for cases filed	total core in obligated on or	of \$6,425* or more pay ions, such as che after the date o	re? ments and th ild support ar f adjustment.	(8) as "incurred by an e total amount you id alimony. Also, do
		■ No.	Go to line 7								
		□ Yes		ments for d	omestic support o		al of \$600 or more ons, such as child				creditor. Do not include payments to an
	Creditor's	s Name and	Address		Dates of payme	ent	Total amoun		Amount you still owe	Was this p	ayment for

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Case number (if known) 19-30185 Document Debtor 1 Valerie C Dolan Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations

	of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	control, or owner of 20% or		securities; and ar				
	No							
	LI Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost				ccount of a de	bt that benefited an		
	No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name		
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. □ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	ture of the case Court or agency			Status of the case		
	Lendmark Financial Services v Valerie Dolan GV18008367-00	Warrant in Debt	arrant in Debt Petersburg General District Court 35 East Tabb Street Petersburg, VA 23803			☐ On appeal ☐ Concluded		
					returns 1-2	23-19		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		rty repossessed, fo	oreclosed, garnis	shed, attached	, seized, or levied?		
	No. Go to line 11.							
	Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened						
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No		uding a bank or fin	ancial institution	, set off any a	mounts from your		
	Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount		
12.	court-appointed receiver, a custodian, or a		rty in the possessi	on of an assigne	e for the bene	fit of creditors, a		
	☐ Yes							

8

9

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Debtor 1 Valerie C Dolan

Pa	t 5: List Certain Gifts and Contributions	s								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value						
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?					
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value					
Pa	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details.	otcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,					
	how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Pa	t 7: List Certain Payments or Transfers	1								
16.	consulted about seeking bankruptcy or p	repar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you					
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Jeanne E. Hovenden, P.L.L.C. 9830 Lori Road P O Box 1839 Chesterfield, VA 23832		\$1500 in total fees and costs: \$335 filing fee, \$25 for credit report, \$22 HS Deed filing fee, and \$1118.00 in legal fees Prior to filing	Prior to filing	\$1,500.00					
	Money Sharp 1916 N. Fairfield Ave Suite 200 Chicago, IL 60647		credit counseling	prior to filing	\$10.00					

Case 19-30185-KLP Doc 6 Filed 01/15/19 Entered 01/15/19 14:33:51 Desc Main Page 33 of 36 Document ase number (if known) 19-30185 Debtor 1 Valerie C Dolan 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred Virginia Credit Union (p) XXXX-0814 11-23-18 \$8.00 Checking P.O. Box 90010 □ Savings Richmond, VA 23225-6010 ☐ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

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A partner in a partnership
An officer, director, or managing executive of a corporation
An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

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Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

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Part 12: Sign Below		
are true and correct. I understand that n	t of Financial Affairs and any attachments, and I declare under penalty of perjury that the anaking a false statement, concealing property, or obtaining money or property by fraud in concept to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Valerie C Dolan		
Valerie C Dolan	Signature of Debtor 2	
Signature of Debtor 1		
Date January 3, 2019	Date	
Did you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No		
☐ Yes		
Did you pay or agree to pay someone w	o is not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person . Attach th	Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	